04/14/2008 12:17

Image# 28931101415

#### FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		roi Oti	iei iliali Ali	Authorize	eu Commi	iiiee		Office U	se Only	
1.	NAME OF COMMITTEE (in full)		C MAILING LA E OR PRINT		xample:If typ ver the lines	ing, type				
	Pacific Life Insurance Com	pany Politic	al Action Comm	nittee	1 1 1		1 1 1 1	1 1 1 1 1		
1										1
Ь		. 700 N	lewport Center	Drivo						
AD	DRESS (number and street)	700 N	ewport Center							
Г	Check if different						1 1 1			
-	than previously reported. (ACC)	Newp	ort Beach				CA	9	2660	
2.	FEC IDENTIFICATION NU	JMBER	<b>—</b>	CITY 🛕			STATE	4	ZIPCODE	<b>A</b>
	C00068528			3. IS THIS REPOR	Т	NEW (N) <b>O</b>	R	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	`´ I	Monthly Report	Feb 20 (M	2)	May 20 (M	<b>I</b> 5)	Aug 20 (M8)		Nov 20 (M11) Non-Election (ear Only)
	(a) Quarterly Reports:		Due On:	Mar 20 (M	3)	Jun 20 (M	6)	Sep 20 (M9)		Dec 20 (M12) Non-Election (ear Only)
	April 15		X	Apr 20 (M	1)	Jul 20 (M7	')	Oct 20 (M10)		Jan 31 (YE)
	Quarterly Report		c) 12-Day		Primary (1	 12P)	Ge	neral (12G)	T F	Runoff (12R)
	July 15 Quarterly Report	'	PRE-Electi				H	, ,		(12.1)
	October 15 Quarterly Report	(O3)	Report for	the:	Convention	n (12C)	Sp	ecial (12G)		
	January 31 Quarterly Report			Election on				·	in the State of	
	July 31 Mid-Year Report(Non-elect Year Only) (MY)		d) 30-Day  Post -Electric Report for the second control of the sec		General (	30G)	Ru	noff (30R)	s	Special (30S)
	Termination Rep (TER)	ort	Пероппо	uie.			-		in the	
				Election on					State of	
5.	Covering Period	03 0	200	8	throug	h 0.3	3 1	2008		
l ce	ertify that I have examined this	s Report and	to the best of	my knowledg	e and belief i	t is true, corre	ect and com	plete.		
Тур	oe or Print Name of Treasure	r Robe	ert Haskell							
Sig	nature of Treasurer Elect	ronically File	ed by Robert	Haskell			Date	04 1	4 2	008
NO	DTE : Submission of false, en	roneous. or i	incomplete info	rmation may s	subject the n	erson sianina	this Report	to the penalties	of 2 U.S.0	C 437a.
	Office							1		
	Use Only								FORM ev. 12/2004	

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

R	eport Covering the Period: From:	01 2008	To: 0 3 3 1 2 0 0 8
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
	(a) Cash on Hand January 1 Ž00Š Y Y		92228.41
	(b) Cash on Hand at Begining of Reporting Period	122460.37	
	(c) Total Receipts (from Line 19)	16520.98	49252.94
	(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	138981.35	141481.35
	Total Disbursements (from Line 31)	49000.00	51500.00
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	89981.35	89981.35
	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

#### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

0 1 3<sup>D</sup>1 М М 2008 М М 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 19014.28 9755.32 (i) Itemized (use Schedule A) .......... 6765.66 30238.66 (ii) Unitemized ..... (iii) TOTAL (add 16520.98 49252.94 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 16520.98 49252.94 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 16520.98 49252.94 12, 13, 14, 15, 16, 17, and 18(c)) .....

16520.98

49252.94

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

#### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Transfers to Affiliated/Other Party  Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committeesand Other Political Committees	49000.00	51500.00
	Independent Expenditure (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	49000.00	51500.00
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	49000.00	51500.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	16520.98	49252.94
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	16520.98	49252.94
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person name and address of any political committee to	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politics	tical Action Committee	
Full Name (Last, First, Middle Initial) MR. DAVID R CARMICHAEL		Date of Receipt
Mailing Address 1525 SERENADE TE		03 / 18 / 2008
City CORONA DEL MAR	State Zip Code CA 92625-1753	Transaction ID: 6637854  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Pacific Life	Occupation Sr. Gen Counsel (Ret.)	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	Check
Full Name (Last, First, Middle Initial) MR. ANTHONY J BONNO Mailing Address 61 VERNAL SPC		Date of Receipt
Mailing Address 61 VERNAL SPG		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR10362231865
IRVINE	CA 92603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Pacific Life	Occupation SR VP HR, FAC & CORP TECH	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	P/R Deduction (\$400.00 Monthly)
Full Name (Last, First, Middle Initial) MR. ALAN H BROWN		Date of Receipt
Mailing Address 505 13TH ST		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR10362251865
HUNTINGTON BEACH	CA 92648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer Pacific Life	Occupation AVP INFO TECH OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	P/R Deduction (\$70.00 Monthly)
SUBTOTAL of Receipts This Page (optional)		720.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/37 (check only one)  X 11a 11b 11c 12 13 14 15 16
An or	ly information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee	
<u>/</u>	Full Name (Last, First, Middle Initial) MR. DEWEY P BUSHAW			Date of Receipt
	Mailing Address 29132 ALFIERI ST			M M / D D / Y Y Y Y
	City LAGUNA NIGUEL	State CA	Zip Code 92677	Transaction ID: PR10362301865  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		167.00
	Name of Employer Pacific Life	Occupatio SR VP A	n MF CHF MKTG OFCR	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 501.00	P/R Deduction (\$167.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. MICHAEL J BUSSARD	<u>l</u>		Date of Receipt
	Mailing Address 5256 LYSANDER LN			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362311865
	BRENTWOOD	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.34
	Name of Employer Pacific Life	Occupatio REGION		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		250.02	P/R Deduction (\$83.34 Mon- thly)
	Full Name (Last, First, Middle Initial) MR. EDWARD R BYRD	1		Date of Receipt
	Mailing Address 17520 PAGE CT			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10362321865
	YORBA LINDA	CA	92886	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		110.00
	Name of Employer Pacific Life	Occupatio SR VP &	n CHF ACTG OFCR	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		330.00	P/R Deduction (\$110.00 Mo- nthly)
	UBTOTAL of Receipts This Page (optional)	<u>I</u>		360.34

ITEMIZED RE	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copor for commercial pu	ed from such Reports and St rposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COM				
Full Name (Last, MR. JOSEPH E C	First, Middle Initial) ELENTANO			Date of Receipt
Mailing Address	26661 CAMPESINO			M M / D D / Y Y Y Y
City MISSION VIE	IO	State CA	Zip Code 92691	Transaction ID: PR10362381865  Amount of Each Receipt this Period
FEC ID number of federal political c	of contributing	C	32001	100.00
Name of Employer Pacific Life	er	Occupation SVP PRO	n OD & OPS	
Receipt For: Primary Other (spe	General	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, MS. SHARON A C	First, Middle Initial) HEEVER			Date of Receipt
Mailing Address	33512 VALLE RD			M M / D D / Y Y Y Y
City		State	Zip Code	Transaction ID: PR10362401865
SN JUAN CAF		CA	92675	Amount of Each Receipt this Period
FEC ID number of federal political c		C		100.00
Name of Employer Pacific Life	er	Occupation	n GEN COUNSEL	
Receipt For:		-	e Year-to-Date ▼	
Primary Other (spe	☐ General	0 0	300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, MR. DENNIS M C				Date of Receipt
Mailing Address	15136 TOURAINE WA	Y		M M / D D / Y Y Y Y
City		State	Zip Code	Transaction ID: PR10362511865
IRVINE FEC ID number of	of contributing	CA	92604	Amount of Each Receipt this Period
federal political c		C		100.00
Name of Employer Pacific Life	er	Occupation VP TAX	n COMPLIANCE	
Receipt For:	Conoral	Aggregate	e Year-to-Date ▼	
Primary Other (spe	☐ General cify) <del>▼</del>		300.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Rec				300.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using t	I Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Pol	itical Action Committee	
Full Name (Last, First, Middle Initial) MR. MICHAEL R CURRY		Date of Receipt
Mailing Address 12162 WICKLOW L	N	M " M / D " D / Y " Y " Y " Y
City NAPLES	State Zip Code FL 34120	Transaction ID: PR10362571865
FEC ID number of contributing federal political committee.	FL 34120	Amount of Each Receipt this Period  100.00
Name of Employer Pacific Life	Occupation FVP FIELD WHOLESALING	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. STEPHANIE J CURRY Mailing Address PO BOX 15358		Date of Receipt
City IRVINE	State Zip Code CA 92623	Transaction ID: PR10362591865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32023	85.00
Name of Employer Pacific Life	Occupation AVP ADVANCED SALES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	P/R Deduction (\$85.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. LINDA D LARSON		Date of Receipt
Mailing Address 8315 ROAD R NW		M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR10362621865
QUINCY	WA 98848	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	90.00
Name of Employer Pacific Life	Occupation AVP IND COMPLIANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	P/R Deduction (\$90.00 Monthly)
SURTOTAL of Receipts This Page (optional)		275.00

SCHEDULE A (FEC Foi	Use separate schedul for each category of the Detailed Summary Page	ne (crieck offly offe)
Any information copied from such Re or for commercial purposes, other that	ports and Statements may not be sold or used by an using the name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Comp	any Political Action Committee	
Full Name (Last, First, Middle Initi	al)	Date of Receipt
Mailing Address 64 SUMMER	STONE	M   M   / D   D   / Y   Y   Y   Y
City IRVINE	State Zip Code CA 92614	Transaction ID: PR10362711865
FEC ID number of contributing federal political committee.	C 32014	Amount of Each Receipt this Period  125.00
Name of Employer Pacific Life	Occupation  AVP STRATEGIC PROGRAM	S
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375	.00 P/R Deduction (\$125.00 Monthly)
Full Name (Last, First, Middle Initi	al)	Date of Receipt
Mailing Address 31411 MON	M " M / D " D / Y " Y " Y " Y	
City	State Zip Code	Transaction ID: PR10362861865
LAGUNA BEACH	CA 92651	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Pacific Life	Occupation SR VP OPERATIONS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450	.00 P/R Deduction (\$150.00 Monthly)
Full Name (Last, First, Middle Initi	al)	Date of Receipt
Mailing Address 7 SOVENTE		M ' M / D D / Y ' Y ' Y ' Y
City	State Zip Code	Transaction ID: PR10362901865
IRVINE	CA 92606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer Pacific Life	Occupation AVP NEW BUSINESS SVCS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210	.00 P/R Deduction (\$70.00 Mon-thly)
OUDTOTAL of Decision This Decision	(optional)	345.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	· )	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)   X   11a			
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Pol	litical Action Co	ommittee				
Full Name (Last, First, Middle Initial)			Date of Receipt			
	MR. ROBERT G HASKELL  Mailing Address 31735 SEACLIFF DR					
City	State	Zip Code	Transaction ID: PR10363061865			
LAGUNA BEACH	CA	92651	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		416.66			
Name of Employer Pacific Life	Occupatio SR VP P	n UBLIC AFFAIRS				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1249.98	P/R Deduction (\$416.66 Monthly)			
Full Name (Last, First, Middle Initial) MR. DALE E HAWLEY			Date of Receipt			
Mailing Address 1137 SUNSET CLIF	M " M / D " D / Y " Y " Y " Y					
City State		Zip Code	Transaction ID: PR10363071865			
SAN DIEGO	CA	92107	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.			74.00			
Name of Employer Pacific Life	Occupatio AVP INV	n EST CNSL				
Receipt For:	Aggregate	e Year-to-Date ▼				
Primary General Other (specify) ▼		222.00	P/R Deduction (\$74.00 Monthly)			
Full Name (Last, First, Middle Initial) MR. ROBERT J HEMSTEAD			Date of Receipt			
Mailing Address 310 E MCCOY LN			M M / D D / Y Y Y Y			
City	State	Zip Code	Transaction ID: PR10363101865			
SANTA MARIA	CA	93455	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		85.00			
Name of Employer Pacific Life		ALUATION ACTUARY				
Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	D/D D. J. W. (dos. co.)			
Other (specify) ▼		255.00	P/R Deduction (\$85.00 Mon- thly)			
SUBTOTAL of Receipts This Page (optional			575.66			

SCHEDULE A ( ITEMIZED REC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied for for commercial purpos	rom such Reports and Stater ses, other than using the nam	nents may not be sold or used by any persone and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMIT Pacific Life Insura	TEE (In Full) unce Company Political A	Action Committee	
Full Name (Last, Firs			Date of Receipt
Mailing Address 23	3972 GOLDENEYE DR		M M / D D / Y Y Y Y
City LAGUNA NIGUEI	_	State Zip Code CA 92677	Transaction ID: PR10363161865  Amount of Each Receipt this Period
FEC ID number of co	ontributing	C	100.00
Name of Employer Pacific Life		Occupation /P INV ADVISOR OPS	
Receipt For: Primary Other (specify)	General	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, Firs			Date of Receipt
Mailing Address 85	554 202ND STREET SW	M M / D D / Y Y Y Y	
City		State Zip Code	Transaction ID: PR10363241865
EDMONDS		WA 98026	Amount of Each Receipt this Period
FEC ID number of confederal political comm		C	100.00
Name of Employer Pacific Life		Occupation DIVISION VP	
Receipt For:		Aggregate Year-to-Date ▼	
Other (specify)	General ▼	300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, Firs	•		Date of Receipt
	312 LEADBURN RD		M M / D D / Y Y Y Y
City		State Zip Code	Transaction ID: PR10363271865
TOWSON		MD 21204	Amount of Each Receipt this Period
FEC ID number of co federal political comn		С	100.00
Name of Employer Pacific Life		Occupation FVP FIELD WHOLESALING	
Receipt For: Primary Other (specify)	General	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
CURTOTAL of Descript	T.: D. ( :: 1)		300.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any inforr	nation copied from such Reports and S nmercial purposes, other than using the	Statements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	OF COMMITTEE (In Full) ic Life Insurance Company Politic	cal Action C	ommittee	
	ame (Last, First, Middle Initial)			Date of Receipt
Mailing	g Address 906 NEWTON LN			M M / D D / Y Y Y Y
City	CENTIA	State CA	Zip Code 92870	Transaction ID: PR10363281865  Amount of Each Receipt this Period
FEC II	O number of contributing I political committee.	C	02070	75.00
Name Pacific	of Employer Clife	Occupation VP COR	n P APPL SYSTEMS	
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Mon-thly)
	ame (Last, First, Middle Initial) RIAN D KLEMENS			Date of Receipt
Mailing	Address 24611 BENJAMIN CIF	R		M " M / D " D / Y " Y " Y " Y
City		State	Zip Code	Transaction ID: PR10363371865
<u>DAN</u>	A POINT	CA	92629	Amount of Each Receipt this Period
	D number of contributing I political committee.	C		80.00
Name Pacific	of Employer c Life	Occupation VP COR	n PORATE CONTROLLER	
Receip	ot For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ♥		240.00	P/R Deduction (\$80.00 Mon- thly)
	ame (Last, First, Middle Initial) DHN P KONTOS	1		Date of Receipt
-	g Address 6307 CAMINO MARIN	ERO		M M / D D / Y Y Y Y
City	OL EMENTE	State	Zip Code	Transaction ID: PR10363421865
	CLEMENTE  Discrepance of contributing	CA	92673	Amount of Each Receipt this Period
	I political committee.	C		110.00
	of Employer C Life	Occupation VP KEY	n ACCOUNT MKTG	
Receip		Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ♥		330.00	P/R Deduction (\$110.00 Monthly)
	FAL of Receipts This Page (optional)	<u> </u>		265.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 37 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Pol		y solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR. FLETCHER C LARSON		Date of Receipt
Mailing Address 709 AVENIDA MIRC		M " M / D " D / Y " Y " Y " Y
City	State Zip Code	Transaction ID: PR10363471865
PALOS VERDES EST	CA 90274	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Pacific Life	Occupation REGIONAL VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	P/R Deduction (\$150.00 Monthly)
Full Name (Last, First, Middle Initial) MR. DAVID LAWS		Date of Receipt
Mailing Address 10935 E BERRY AV	Æ	M M / D D / Y Y Y Y
City	State Zip Code	Transaction ID: PR10363481865
ENGLEWOOD	CO 80111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Pacific Life	Occupation REGIONAL VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. LAURENE E MAC ELWEE		Date of Receipt
Mailing Address 1033 SECRETARIA	T CIR	M M M / D D / Y V Y Y
City	State Zip Code	Transaction ID: PR10363561865
COSTA MESA	CA 92626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Pacific Life	Occupation AVP VARIABLE REG COMPL	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	P/R Deduction (\$100.00 Monthly)
CURTOTAL of Passints This Pass (antisass)	)	350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		ZED RECEIPTS for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 15 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16	
Any infor or for cor	mation copied from such Reports and S	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
\	OF COMMITTEE (In Full) ic Life Insurance Company Politi	cal Action C	ommittee		
	ame (Last, First, Middle Initial)			Date of Receipt	
Mailin	g Address 74 SETON RD			M M / D D / Y Y Y Y	
City <u>IRVII</u>	NE	State CA	Zip Code 92612	Transaction ID: PR10363591865  Amount of Each Receipt this Period	
	D number of contributing al political committee.	C		120.00	
Name Pacifi	of Employer c Life	Occupatio	n NUITY APPS ADMIN		
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	P/R Deduction (\$120.00 Monthly)	
	ame (Last, First, Middle Initial)			Date of Receipt	
Mailin	g Address 622 18TH ST			M M / D D / Y Y Y Y	
City		State	Zip Code	Transaction ID: PR10363611865	
<u>HUN</u>	TINGTON BEACH	CA	92648	Amount of Each Receipt this Period	
	D number of contributing al political committee.	C		80.00	
Name Pacifi	of Employer c Life	Occupation AVP INS			
	pt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		240.00	P/R Deduction (\$80.00 Mon- thly)	
	ame (Last, First, Middle Initial) ULIA C MC KINNEY			Date of Receipt	
Mailin	g Address 207 N ELLERY DR			M " M / D " D / Y " Y " Y " Y	
City		State	Zip Code	Transaction ID: PR10363631865	
	PEDRO	CA	90732	Amount of Each Receipt this Period	
	D number of contributing al political committee.	C		75.00	
	of Employer c Life	Occupation AVP INS			
	pt For: Primary ☐ General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Mon-thly)	
CURTO	TAL of Receipts This Page (optional)	1		275.00	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 37 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Committee	
Full Name (Last, First, Middle Initial) MR. HENRY M MC MILLAN		Date of Receipt
Mailing Address 4006 INLET ISLE DI		M M / D D / Y Y Y Y
City CORONA DEL MAR	State Zip Code CA 92625	Transaction ID: PR10363661865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Pacific Life	Occupation SR VP & CHIEF RISK OFCR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. AUDREY L MILFS Mailing Address 26922 ROCKING HO	DRSE I N	Date of Receipt
City LAGUNA HILLS	State Zip Code CA 92653	Transaction ID: PR10363711865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Pacific Life	Occupation VP & SECRETARY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$250.00 Monthly)
Full Name (Last, First, Middle Initial) MR. JAMES T MORRIS		Date of Receipt
Mailing Address 29022 PINTAIL CIR		M " M / D " D / Y " Y " Y " Y
City	State Zip Code	Transaction ID: PR10363791865
LAGUNA NIGUEL	CA 92677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.00
Name of Employer Pacific Life	Occupation PRESIDENT & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.00	P/R Deduction (\$416.00 Monthly)
SUBTOTAL of Receipts This Page (optional)		766.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		ZED RECEIPTS  for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 17 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16	
Any or f	r information copied from such Reports and or commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
\	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	ical Action C	ommittee		
	Full Name (Last, First, Middle Initial) MR. JOHN C MULVIHILL			Date of Receipt	
	Mailing Address 27822 HOMESTEAD	RD		M " M / D " D / Y " Y " Y " Y	
	City	State	Zip Code	Transaction ID: PR10363801865	
Ī	LAGUNA NIGUEL FEC ID number of contributing federal political committee.	CA	92677	Amount of Each Receipt this Period  175.00	
Ī	Name of Employer Pacific Life	Occupation VP RF A	n SSET MGMT		
Ī	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 525.00	P/R Deduction (\$175.00 Monthly)	
	Full Name (Last, First, Middle Initial) MR. DARAGH M O'SULLIVAN			Date of Receipt	
Ī	Mailing Address 177 22ND ST APT 14	1		M   M   / D   D   / Y   Y   Y   Y	
	City	State	Zip Code	Transaction ID: PR10363901865	
	COSTA MESA	CA	92627	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		200.00	
Ī	Name of Employer Pacific Life	Occupation VP PRO	n DUCT DESIGN		
Ī	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$200.00 Monthly)	
	Full Name (Last, First, Middle Initial) MS. ALYCE PETERSON			Date of Receipt	
Ī	Mailing Address 2908 VIA HIDALGO			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR10364021865	
	SAN CLEMENTE	CA	92673	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		75.00	
	Name of Employer Pacific Life	Occupation VP MAR	n KETING SVCS		
Ī	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Primary ☐ General Other (specify) ▼		225.00	P/R Deduction (\$75.00 Mon- thly)	
	JBTOTAL of Receipts This Page (optional)			450.00	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		FD RECEIPTS for each category of the Detailed Summary Page	
ny information copied from such Reports and r for commercial purposes, other than using the	I Statements may he name and add	not be sold or used by any persol ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Poli	tical Action Co	mmittee	
Full Name (Last, First, Middle Initial) MR. THEODORE A PREMER			Date of Receipt
Mailing Address 20 MOLINO			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR10364081865
NEWPORT BEACH	CA	92660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Pacific Life	Occupation VP COMI	M MORT PROD	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$150.00 Mo-
Other (specify) ▼	0 0	450.00	nthly)
Full Name (Last, First, Middle Initial) MR. JAMES R RICE			Date of Receipt
Mailing Address 11 STILLWATER			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR10364141865
IRVINE	CA	92603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		110.00
Name of Employer Pacific Life	Occupation VP M FIN	IANCIAL DISTRIBUTION	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	330.00	P/R Deduction (\$110.00 Monthly)
Full Name (Last, First, Middle Initial) MR. GERALD W ROBINSON			Date of Receipt
Mailing Address 38347 N 104TH PL			M M / D D / Y Y Y Y
City	State	Zip Code	Transaction ID: PR10364181865
SCOTTSDALE	AZ	85262	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Pacific Life	Occupation EXEC VF	n PANNUITIES	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	900.00	P/R Deduction (\$300.00 Monthly)
SUBTOTAL of Receipts This Page (optional)			560.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 37 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any persol ress of any political committee to	
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Polit	tical Action Co	ommittee	
Full Name (Last, First, Middle Initial) MR. ROBERT D RUSSELL			Date of Receipt
Mailing Address 51202 EASTCHURCI	Н		M   M   / D   D   / Y   Y   Y   Y
City CHAPEL HILL	State NC	Zip Code 27517	Transaction ID: PR10364231865
FEC ID number of contributing federal political committee.	C	2/3//	Amount of Each Receipt this Period 75.00
Name of Employer Pacific Life	Occupation AVP RE	n INVESTMENTS	
Receipt For:  Primary  General  Other (specify) ▼	<del>'</del>	Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Mon-thly)
Full Name (Last, First, Middle Initial) MR. RICHARD J SCHINDLER Mailing Address 28792 APPLETREE			Date of Receipt
City	Ctata	7in Codo	
City MISSION VIEJO	State CA	Zip Code 92692	Transaction ID: PR10364261865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Pacific Life	Occupation SR VP LI	FE CHF MKTG OFCR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$125.00 Monthly)
Full Name (Last, First, Middle Initial) MS. CATHY L SCHWARTZ			Date of Receipt
Mailing Address 87 PELICAN CT			M " M / D " D / Y " Y " Y " Y
City	State	Zip Code	Transaction ID: PR10364311865
NEWPORT BEACH	CA	92660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Pacific Life	Occupation AVP CRE	n EDIT ANALYSIS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (optional)			300.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		ZED RECEIPTS  for each category of the Detailed Summary Page	
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politi	cal Action C	ommittee	
<u></u>	Full Name (Last, First, Middle Initial) MS. PENNY S SPARKS			Date of Receipt
	Mailing Address 1661 UTAH CIR			M " M / D " D / Y " Y " Y " Y
	City COSTA MESA	State CA	Zip Code 92626	Transaction ID: PR10364441865  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32020	75.00
	Name of Employer Pacific Life	Occupation DIR POF	n RTFOLIO OPS	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. JOHN G TORELL			Date of Receipt
	Mailing Address 355 S LORETTA DR			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364581865
	ORANGE	CA	92869	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupation VP ACC	n TG & RPTG	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		225.00	P/R Deduction (\$75.00 Mon- thly)
	Full Name (Last, First, Middle Initial) MR. KHANH T TRAN			Date of Receipt
	Mailing Address 47 VERNAL SPG			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364601865
	IRVINE FEC ID number of contributing	CA	92603	Amount of Each Receipt this Period
	federal political committee.	C		416.66
	Name of Employer Pacific Life	Occupation EXEC VI		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1249.98	P/R Deduction (\$416.66 Monthly)
Γ,	SUBTOTAL of Receipts This Page (optional)	1	_	566.66

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		ED RECEIPTS for each category of the Detailed Summary Page	
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Pacific Life Insurance Company Polit	ical Action C	ommittee	
	Full Name (Last, First, Middle Initial) MR. JOHN M WALDECK			Date of Receipt
	Mailing Address 67 LAURELHURST D	PR		M M / D D / Y Y Y Y
	City LADERA RANCH	State CA	Zip Code 92694	Transaction ID: PR10364651865  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Pacific Life	Occupation VP RE U	on JWG & CONST SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
_	Full Name (Last, First, Middle Initial) MS. NANCY A WEBB			Date of Receipt
	Mailing Address 36 BLACK HAWK			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364701865
	IRVINE	CA	92603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Pacific Life	Occupation VP FINA		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$100.00 Monthly)
	Full Name (Last, First, Middle Initial) MR. JOHN WHITE			Date of Receipt
	Mailing Address 32122 VIA CARLOS			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR10364741865
	SN JUAN CAPISTRANO	CA	92675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	_ '	RNAL WHLSLNG	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)			275.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		ZED RECEIPTS for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 22 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16	
Any ir or for	nformation copied from such Reports and commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
\ \	AME OF COMMITTEE (In Full) acific Life Insurance Company Polit	ical Action C	ommittee		
	ıll Name (Last, First, Middle Initial) R. MICHAEL A BELL			Date of Receipt	
Ma	ailing Address 2 PRECIPICE			M M / D D / Y Y Y Y	
Ci L	ty AGUNA NIGUEL	State CA	Zip Code 92677	Transaction ID: PR10365141865  Amount of Each Receipt this Period	
FE	EC ID number of contributing deral political committee.	C	32011	250.00	
Na Pa	ame of Employer acific Life	Occupation EVP LIF	on E INSURANCE		
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	P/R Deduction (\$250.00 Monthly)	
	ıll Name (Last, First, Middle Initial) R. PHILIP A TEETER			Date of Receipt	
Ma	ailing Address 376 MYRTLE ST			M M / D D / Y Y Y Y	
Ci		State	Zip Code	Transaction ID: PR10365471865	
_	AGUNA BEACH	CA	92651	Amount of Each Receipt this Period	
	EC ID number of contributing deral political committee.	C		125.00	
Na Pa	ame of Employer acific Life	Occupatio VP ANN	n TECHNOLOGY		
Re	eceipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) ▼		375.00	P/R Deduction (\$125.00 Monthly)	
	ull Name (Last, First, Middle Initial) R. ROBERT C HSU			Date of Receipt	
Ma	ailing Address 1121 EBBTIDE RD			M M / D D / Y Y Y Y	
Ci	•	State	Zip Code	Transaction ID: PR10365661865	
	ORONA DEL MAR	CA	92625	Amount of Each Receipt this Period	
	EC ID number of contributing deral political committee.	C		130.00	
	ame of Employer acific Life	Occupation SR VP A	n NN ADMIN		
Re	eceipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	390.00	P/R Deduction (\$130.00 Monthly)	
	TOTAL of Receipts This Page (optional)	1		505.00	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16
any information copied from such Reports and r for commercial purposes, other than using t	d Statements may not be sold or used by any per he name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Pacific Life Insurance Company Poli	itical Action Committee	
Full Name (Last, First, Middle Initial) MS. VALERIE MORRIS		Date of Receipt
Mailing Address 48 W YALE LOOP		M M / D D / Y Y Y Y
City IRVINE	State Zip Code CA 92604	Transaction ID: PR10365681865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32004	85.00
Name of Employer Pacific Life	Occupation VP HR PRGMS & SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  255.00	P/R Deduction (\$85.00 Mon-thly)
Full Name (Last, First, Middle Initial) MS. PATRICIA'S DOUGLASS Mailing Address 640 SAINT JAMES F		Date of Receipt
City NEWPORT BEACH	State Zip Code CA 92663	Transaction ID: PR10365731865
FEC ID number of contributing federal political committee.	C 32003	Amount of Each Receipt this Period 215.00
Name of Employer Pacific Life	Occupation VP GOVT RELNS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 645.00	P/R Deduction (\$215.00 Monthly)
Full Name (Last, First, Middle Initial) MR. WILLIAM D BURKE		Date of Receipt
Mailing Address 2216 NELDA WAY		M " M / D " D / Y " Y " Y " Y
City	State Zip Code	Transaction ID: PR10365781865
ALAMO	CA 94507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Pacific Life	Occupation REGIONAL VP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (optional)		400.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 24/37   (check only one)     X   11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Pol		· ·	
Full Name (Last, First, Middle Initial) MR. RODERICK P HANSEN			Date of Receipt
Mailing Address 21612 MARIGOT D	R		M M / D D / Y Y Y Y
City	State FL	Zip Code	Transaction ID: PR10365851865
BOCA RATON  FEC ID number of contributing federal political committee.	C	33428	Amount of Each Receipt this Period  100.00
Name of Employer Pacific Life	Occupation REGION		7
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MR. JOHN F O'DONNELL			Date of Receipt
Mailing Address 30 BRIAN RD			M M / D D / Y Y Y Y
City BRIDGEWATER	State MA	Zip Code 02324	Transaction ID: PR10365961865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	UZUZT	100.00
Name of Employer Pacific Life	Occupation DIVISION		7
Receipt For:  Primary General  Other (specify) ▼	- 1 ·	Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. JULIET A PINKERTON			Date of Receipt
Mailing Address 22 N PALMIERA CII	R		M M / D D / Y Y Y Y
City THE WOODLANDS	State TX	Zip Code	Transaction ID: PR10365991865
FEC ID number of contributing federal political committee.	C	77382	Amount of Each Receipt this Period  250.00
Name of Employer Pacific Life	Occupation REGION		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$250.00 Monthly)
SUBTOTAL of Receipts This Page (optional	)		450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		ED RECEIPTS for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 25 / 37 (check only one)  X 11a 11b 11c 12  13 14 15 16	
Any infor c	ormation copied from such Reports and ommercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
\	ME OF COMMITTEE (In Full) cific Life Insurance Company Politi	ical Action C	ommittee		
	Name (Last, First, Middle Initial) RICHARD A TAUBE			Date of Receipt	
Mail	ling Address 24081 NUTHATCH LI	V		M M / D D / Y Y Y Y	
City		State CA	Zip Code	Transaction ID: PR10366041865	
FEC	GUNA NIGUEL  CID number of contributing eral political committee.	C	92677	Amount of Each Receipt this Period  75.00	
Nan Pad	ne of Employer ific Life	Occupation VP PRO	n DUCT MGMT		
Rec	eeipt For: Primary General Other (specify)		e Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Mon-thly)	
	Name (Last, First, Middle Initial) TRAVIS R MC KAY			Date of Receipt	
Mail	ling Address 24719 JOLEE CT			M " M / D " D / Y " Y " Y " Y	
City		State	Zip Code	Transaction ID: PR10366061865	
	AINFIELD	<u>IL</u>	60544	Amount of Each Receipt this Period	
	CID number of contributing eral political committee.	C		100.00	
Nan Pac	ne of Employer ific Life	Occupation SR WHC	n DLESALER		
Rec	eipt For:	_	e Year-to-Date ▼		
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$100.00 Monthly)	
	Name (Last, First, Middle Initial) KATHARINE B YOUNG	1		Date of Receipt	
	ling Address 18647 SANTA ISADC	RA ST		M M / D D / Y Y Y Y	
City		State	Zip Code	Transaction ID: PR10366101865	
	UNTAIN VALLEY	CA	92708	Amount of Each Receipt this Period	
	CID number of contributing eral political committee.	C		75.00	
Nan Pac	ne of Employer ific Life	Occupation AVP VAI	n _UATION & RPTG		
Rec	eipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		225.00	P/R Deduction (\$75.00 Mon- thly)	
	OTAL of Receipts This Page (optional) .	1		250.00	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 26 / 37 (check only one)    X   11a
Any information copied from such Report or for commercial purposes, other than u	s and Statements may not be solo sing the name and address of any	d or used by any perso political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company	Political Action Committee		
Full Name (Last, First, Middle Initial) MR. MICHAEL S ROBB			Date of Receipt
Mailing Address 27481 VANTAG			M M / D D / Y Y Y Y
City	State Zip Co	de	Transaction ID: PR10366191865
SN JUAN CAPISTRANO	CA 92675		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Pacific Life	Occupation EXEC VP RE INVE	EST	
Receipt For:	Aggregate Year-to-Da	te ▼	7
Primary General Other (specify) ▼		750.00	P/R Deduction (\$250.00 Monthly)
Full Name (Last, First, Middle Initial) MR. RICHARD M WILKES	<u>'</u>		Date of Receipt
Mailing Address 7124 HAWKSB	EARD DR		M " M / D " D / Y " Y " Y " Y
City	State Zip Co	de	Transaction ID: PR10366271865
WESTERVILLE	OH 43082		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Pacific Life	Occupation SR WHOLESALER	₹	
Receipt For:	Aggregate Year-to-Da	te ▼	
Primary General Other (specify) ▼	1 1 1 1	300.00	P/R Deduction (\$100.00 Monthly)
Full Name (Last, First, Middle Initial) MS. MARY ANN BROWN			Date of Receipt
Mailing Address 304 WEYMOUT	H PL		M " M / D " D / Y " Y " Y " Y
City	State Zip Co	de	Transaction ID: PR10366311865
LAGUNA BEACH	CA 92651		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		416.66
Name of Employer Pacific Life	Occupation SR VP CORP DEV	'ELPMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	te ▼ 1249.98	P/R Deduction (\$416.66 Monthly)
SUBTOTAL of Receipts This Page (opt	onal)		766.66

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 37 (check only one)    X   11a
Any information or for commercia	copied from such Reports and Sal purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1 \	OMMITTEE (In Full) Insurance Company Politi	cal Action C	ommittee	
Full Name (L MR. SIMON S	ast, First, Middle Initial) FENG			Date of Receipt
Mailing Addre	ess 10 CANDELA			M M / D D / Y Y Y Y
City <u>IRVINE</u>		State CA	Zip Code 92620	Transaction ID: PR10366351865  Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		150.00
Name of Emp Pacific Life	oloyer	Occupatio VP INFC		
Receipt For: Primary Other (	/ General specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	P/R Deduction (\$150.00 Monthly)
Full Name (L	ast, First, Middle Initial)			Date of Receipt
Mailing Addre	ess 45137 BIG CANYON	ST		M M / D D / Y Y Y Y
City		State	Zip Code	Transaction ID: PR10366361865
INDIO		CA	92201	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		100.00
Name of Emp Pacific Life	oloyer	Occupation VP TAX	n	
Receipt For:		Aggregate	e Year-to-Date 🔻	
Other (	/		300.00	P/R Deduction (\$100.00 Monthly)
Full Name (L MR. JAMES k	ast, First, Middle Initial) (ARAFA	<u> </u>		Date of Receipt
Mailing Addre	ess 182 STANHOPE RD			M M / D D / Y Y Y Y
City		State	Zip Code	Transaction ID: PR10366401865
<u>SPARTA</u>		NJ	07871	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing al committee.	C		75.00
Name of Emp Pacific Life	oloyer	Occupation REGION		
Receipt For: Primary Other (	General General <b>▼</b>	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$75.00 Monthly)
CUPTOTAL of	Receipts This Page (optional)			325.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 37 (check only one)    X
4	Any information copied from such Reports and S or for commercial purposes, other than using the	statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Politic	cal Action Co	ommittee	
۷.	Full Name (Last, First, Middle Initial) MR. KYLE R WOODDELL			Date of Receipt
	Mailing Address 2500 CHRISTOPHER	OAKS CT		M M / D D / Y Y Y Y
	City SAINT LOUIS	State MO	Zip Code 63129	Transaction ID: PR10366591865  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer Pacific Life	Occupatio SR WHC	n DLESALER	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$100.00 Monthly)
-	Full Name (Last, First, Middle Initial) MR. STUART A HOLLAND Mailing Address 4931 CAREFREE TRA	AIL		Date of Receipt
	City	State	Zip Code	Transaction ID: PR10366911865
	PARKER	CO	80134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Pacific Life	Occupatio SR FVP-		
	Receipt For:	. '	e Year-to-Date	
	Primary General Other (specify) ▼		225.00	P/R Deduction (\$75.00 Mon-thly)
_	Full Name (Last, First, Middle Initial) MR. STEPHEN K BEST	1		Date of Receipt
	Mailing Address 445 FLINT AVE			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR10614791865
	LONG BEACH FEC ID number of contributing federal political committee.	CA	90814	Amount of Each Receipt this Period  100.00
	Name of Employer Pacific Life	Occupatio SR WHC	n DLESALER	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$100.00 Monthly)
	SUBTOTAL of Receipts This Page (optional)	l		275.00

A.

#### **SCHEDULE A (FEC Form 3X)**

FOR LINE NUMBER: PAGE 29/37 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) MR. MATTHEW WELLS Date of Receipt Mailing Address 120 BONITA DR M M / D D / City State Zip Code Transaction ID: PR10614921865 **HOMEWOOD** Αl 35209 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Pacific Life Occupation SR WHOLESALER Receipt For: Aggregate Year-to-Date Primary General P/R Deduction (\$100.00 Mo-300.00 nthly) Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	100.00
TOTAL This Period (last page this line number only)	<u> </u>	9755.32

	(FEC Form 3X)	Use sep	arate schedule(s)		-		PAGE 30/37
TEMIZED DIS	BURSEMENTS	for each	category of the Summary Page		(check or 21b 27	22   X 23   24   28a   28b   28	
	from such Reports and Stater oses, other than using the nam						
NAME OF COMMI		o and addre	boo or arry portious			onon contributions from cast	
1	rance Company Political A	Action Con	nmittee				
Full Name (Last, Fi	•					Transaction ID: 66354	199
American Counc	cil of Life Insurers PAC					Date of Disbursement	V
Mailing Address	101 Constitution Avenue	, NW, Sui	te			03 / 17	Ý Ž 0 Ď 8 Ý
City		State DC	Zip Code 20002			Amount of Each Disbur	sement this Perio
Washington Purpose of Disburs	sement	DC	20002			-	5000.00
Contribution (ACLI					011		
Candidate Name					tegory/ Type		
Office Sought:	House Disburse	ement For:		'	,,,,	Contribution (ACLLD	(AC)
	Senate	Primary	General			Contribution (ACLI P	AC)
State:	President District:	Other (sp	ecity)				
Full Name (Last, Fi						Transaction ID: 66355	500
Berkley For Con	•					Date of Disbursement	500
Mailing Address	3069 Conquista Court					03 / 17 /	2008
City Las Vegas		State NV	Zip Code 89121			Amount of Each Disbur	sement this Perio
Purpose of Disburs	sement					1	1000.00
Contribution					011		
Candidate Name Rep. Shelley Be	rkley				tegory/ Type		
Office Sought:	χ House Disburs	ement For:	2008			Contribution	
	<b>⊢</b>	Primary	General			Continbution	
State: NV	President District: 01 2008 U	Other (sports)					
Full Name (Last, Fi						Transaction ID: 6635	507
ERICPAC						Date of Disbursement	Y Y Y Y
Mailing Address	209 Pennsylvania Avenu	ie, SE				03 / 17	Ý Ž 0 Ď 8 Ý
City Washington		State DC	Zip Code 20003			Amount of Each Disbur	sement this Perio
Purpose of Disburs		<u> </u>	20003				1000.00
Contri: Every Repu	blican is Crucial PAC				011 tegory/		
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Office Sought:		ement For:				Contri: Every Republis Crucial PAC	ican
	Senate President	Primary Other (sp	General			is Crucial PAC	
State:	District:	_ Calor (8p					
	l .						7000.00
	rsements This Page (optional)						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NU (check only or	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and Statemor for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political Ad	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) Johanns For U.S. Senate			Transaction ID: 6641031 Date of Disbursement
Mailing Address 1201 O Street Suite 101			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} N & Y \\ O & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ O & O \end{smallmatrix} \end{bmatrix} \ \ \mathbf{X} \ \ \begin{bmatrix} Y & Y \\ O & O \end{smallmatrix} \end{bmatrix} \ \ \mathbf{X} \ \ \mathbf{X} \ \ \mathbf{Y} \ \ \mathbf{X} \ \ \mathbf{Y} \ \ \mathbf{Y}$
	State Zip Code NE 68506		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	5000.00
Candidate Name Mr. Michael Johanns		Category/ Type	
President	Primary General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial)	S Primary		Transaction ID: 6641032
Johanns For U.S. Senate  Mailing Address 1201 O Street Suite 101			Date of Disbursement    M M D D Y
	State Zip Code		Amount of Each Disbursement this Period
Lincoln	NE 68506		
Purpose of Disbursement Contribution Candidate Name		011 Category/	5000.00
Mr. Michael Johanns  Office Sought: House Disburse  X Senate	ment For: 2008 Primary X General	Туре	Contribution
President State: NE District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial) Friends of Sam Johnson			Transaction ID: 6635508 Date of Disbursement
Mailing Address PO Box 860096			$\begin{bmatrix} \begin{smallmatrix} M & 3 & M \\ 0 & 3 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 7 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
	State Zip Code TX 75086		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Samuel Johnson		Category/ Type	
Office Sought:  X House Senate President Disburse	ment For: 2008 Primary X General Other (specify)	(	Contribution
State: TX District: 03			
SUBTOTAL of Disbursements This Page (optional)		<u></u>	11000.00
TOTAL This Period (last page this line number only)		•	

	THEOULE B (FEC FOIII 3X)	Use separate schedule(s)			) FOR LINE NUMBER: PAGE 32 (check only one)							3/
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		$\bigcap$	21b 27	22 28a	<u> </u>	:3 !8b	24 28		25 29	
	y Information copied from such Reports and Stat for commercial purposes, other than using the na											3
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political		21 0011			iioit coriti		10 110	111 0001			
	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	66355	.ng		
	Pennsylvanians for Kanjorski					Date of	of Dist	ourse	ment			
	Mailing Address 126 S. Franklin Street					0 3	M /	<sup>D</sup> 1	7 /	Ý	0 0 8	} <sup>Y</sup>
	City Wilkes-Barre	State Zip Code PA 18701				Amou	nt of E	Each	Disburs	semer	t this F	Perio
	Purpose of Disbursement	177 10701								3	0.00	0
	Contribution			01								
	Candidate Name Paul Kanjorski		C	ateg Typ	- 1							
	Senate President	sement For: 2008  X Primary General  Other (specify)				Contr	ibutic	n				
		US Primary										
	Full Name (Last, First, Middle Initial) John Kerry for Senate					Trans Date			66355 ment	10		
	Mailing Address 511 C Street Ne					0 <sup>M</sup> 3	M /	<sup>D</sup> 1	<sup>D</sup> /	Y	0 0 8	B Y
	City Washington	State Zip Code DC 20002				Amou	nt of E	Each	Disburs	semer	t this F	Perio
	Purpose of Disbursement	20002			-					1	0.00	0
	Contribution			01								
	Candidate Name Sen. John Kerry			ateg Typ	-							
	ÿ	sement For: 2008  X Primary General  Other (specify)				Contr	ibutic	n				
		US Primary										
	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN					Trans Date			66355 ment	511		
	Mailing Address 301 4th Street, NE, 2nd	d Floor				0 <sup>M</sup> 3	M /	<sup>D</sup> 1	7 /	Y 2	0 ŏ 8	3 Y
	City Washington	State Zip Code DC 20002				Amou	nt of E	Each	Disburs	semer	t this F	Perio
	Purpose of Disbursement Contribution		Тг	01			-			1	0.000	0
	Candidate Name Blanche Lincoln		c	ateg	ory/							
	Office Sought: House Disbut	sement For: 2010  X Primary General Other (specify)	<u> </u>	ТУР		Contr	ibutic	n				
_	State: AR District:				_							
	-	l)						-			0.00	

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IT		Use separate schedule(s) (check	INE NUMBER: PAGE 33/3/ only one)
_	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page  21b 27	<u> </u>
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any political committee to	
V	Pacific Life Insurance Company Political A	action Committee	
	Full Name (Last, First, Middle Initial) McConnell Senate Committee '08  Mailing Address PO Box 1496		Transaction ID: 6635513 Date of Disbursement  M M M / D D / Y Y Y O Y S Y O Y S Y
	City Louisville	State Zip Code KY 40201	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	011	2000.00
	Candidate Name Sen. Mitch McConnell	Category/ Type	
	X Senate X President	ement For: 2008 Primary General Other (specify)  S Primary	Contribution
	Full Name (Last, First, Middle Initial) Buck McKeon for Congress	OTTIMALY	Transaction ID: 6635516 Date of Disbursement
	Mailing Address 2875 Towerview Road, S	Suite 1000	03
	City Herndon	State Zip Code VA 20171	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	011 Category/	1000.00
	Senate X President	Type ement For: 2008 Primary General Other (specify) ▼ IS Primary	Contribution
	Full Name (Last, First, Middle Initial) Friends of Congressman George Miller		Transaction ID: 6635517 Date of Disbursement
	Mailing Address 301 4th Street, NE, Suite	202	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Washington	State Zip Code DC 20002	Amount of Each Disbursement this Period
			Amount of Each Disbursement this Period 2500.00
	Washington Purpose of Disbursement	DC 20002	
	Washington  Purpose of Disbursement Contribution  Candidate Name George Miller  Office Sought:  X House Senate President  Disburs	DC 20002  011 Category/	Amount of Each Disbursement this Period 2500.00  Contribution

,	TEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the			heck only	E NUMBER: nly one)					PAGE 34/3		
ΙŤ	EMIZED DIS	SBURSEMEN	15		category of the Summary Page		Ė	21b 27	22 28a	Х	23 28b	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	4 8c	25 29	Н
		ed from such Reports						person f	or the pu		se of s	olicitin	g cor	ntributio	
Or I		poses, other than usir	ig the name	e and addres	ss of any political	COII	HIIII	ilee to so	IICIL COLILI	ibut	ioris iri	om su	SH CC	mmule	<del>)</del>
	NAME OF COMM	urance Company F	Political A	ction Com	ımittee										
$\angle$	i acilic Lile ilis	drance Company i	Untical A	Ction Con	iiiiittee										
	, ,	First, Middle Initial)									on ID:		518		
	Moore for Con	gress								of D м	isburs		V	·	· V
	Mailing Address	PO Box 14631							0,3		1	<sup>D</sup> 7	Ľ	žoŏ	8
	City Shawnee Miss	ion		State KS	Zip Code 66285				Amou	int o	f Each	Disbu	rsem	ent this	Perio
	Purpose of Disbu							-						2000	00
	Contribution					L	01								
	Candidate Name Dennis Moore						ateg Typ	gory/ oe							
	Office Sought:	χ House		ment For:	2008				Contr	ibut	ion				
		Senate President	X	Primary Other (spe	General										
	State: KS	District: 03	2008 US	S Primary											
	, ,	First, Middle Initial)							Trans	acti	on ID:	6635	542		
	Pelosi for Cong	gress								_	isburs				
	Mailing Address	430 South Capi	tol Street,	, SE					0,3	М	<sup>/</sup> 1	<sup>D</sup> 7	Y	žoŏ	8 <sup>Y</sup>
	City Washington			State DC	Zip Code 20003				Amou	int o	f Each	Disbu	rsem	ent this	Perio
	Purpose of Disbu	rsement						-						2500	00
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	Nancy Pelosi						ateg Typ	gory/ be							
	Office Sought:	χ House	Disburse	ment For:	2008		1		Contr	ihut	ion				
		Senate		Primary	X General				Conti	ibui	.1011				
	State: CA	President District: 08		Other (spe	ecity)										
		First, Middle Initial)							Trans	acti	on ID:	6635	510		
	Pomeroy for C	ongress									isburs		515		
	Mailing Address	PO Box 75214							0 <sup>M</sup> 3	М	/ <b>1</b>	<sup>D</sup> 7	Y	žoŏ	8 <sup>Y</sup>
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	Washington Purpose of Disbu	rsement		DC	20013									1000.	00
	Contribution						01	1		-	-		•		
	Candidate Name Earl Pomeroy						ateg Typ	gory/ be							
	Office Sought:	χ House		ment For:	2008				Contr	ihut	ion				
		Senate	X	Primary	General				Conti	ibul	11011				
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	EMIZED DISBUR		Detailed S	category of the Summary Page		À	21b [ 27	22 28a		23 28b	24 280		25 29	
	y Information copied from so or commercial purposes, of NAME OF COMMITTEE ( Pacific Life Insurance)	her than using the In Full)	e name and addres	ss of any political										
$\mathbb{L}$														
	Full Name (Last, First, Mid Pat Roberts For US Se Mailing Address PO E	,						Date o		n ID: ( burser			0 0 8	Υ
	City Great Bend		State KS	Zip Code 67530				Amou	nt of	Each [	Disburs	emen	t this P	erioc
	Purpose of Disbursement Contribution Candidate Name		NO	07000		011						5	000.00	)
	Sen. Pat Roberts					tego Type								
	Office Sought:    Hou   X   Ser     Pre     State: KS   District	nate sident	Sbursement For:  X Primary Other (spe	2008 General				Contri	butio	on				
	Full Name (Last, First, Mid	dle Initial)						Trans	actio	n ID: (	66355	21		
	Royce Campaign Com	mittee							of Dis	D	D /	Y Y	Y	Υ
	Mailing Address PO E	30x 2525						0 3		1	7	. 2	0 Ď 8	
	City Orange		State CA	Zip Code 92859				Amou	nt of	Each [	Disburs		t this P	-
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	Edward Royce					Туре	-							
	Office Sought:  X Hou Ser Pre State: CA District	nate sident	sbursement For: Primary Other (spe	2008 X General cify) ▼				Contri	butio	on				
	Full Name (Last, First, Mid Salazar for Senate	dle Initial)						Date o	of Dis	burse				V
	Mailing Address 426 (	C Street, NE						0 3	М /	1	7 ′	, 2	0 0 8	1
	City Washington		State DC	Zip Code 20002				Amou	nt of	Each [	Disburs	emen	t this P	erio
	Purpose of Disbursement Contribution				Г	011	$\neg$	<u>L.</u>				2	00.00	)
	Candidate Name Ken Salazar				Ca	atego Type	ry/							
	Office Sought:  Hou  X Ser  Pre  State: CO  District	nate sident	Sbursement For:  X Primary Other (spe	2010 General cify)		, i		Contri	butio	on				
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CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)		_	INE NUMBER: PAGE only one)			36 / 3	37			
EMIZED DISBURSEMENTS		category of the Summary Page		21	b [	22 28a	X	23 28b	24		25 29	
ny Information copied from such Reports and St for commercial purposes, other than using the												s
NAME OF COMMITTEE (In Full)	name and addre	ess of any political of	COIT	millee	.0 80	iicit contr	ibuti	ons ire	om suc	II COIIII	millee	
Pacific Life Insurance Company Politic	al Action Con	nmittee										
Full Name (Last, First, Middle Initial)						<b>T</b>	• •	ID	00051	-05		
Shelby for U S Senate								on ID: sburse	6635! ement	025		
Mailing Address Post Office Box 1091						0 <sup>M</sup> 3	М	<b>1</b>	7 /	YZ	2 0 ŏ 8	3 <sup>Y</sup>
City Tuscaloosa	State AL	Zip Code 35401				Amou	nt of	Each	Disbur	semer	nt this I	Perio
Purpose of Disbursement	AL	00401			_					2	000.0	0
Contribution			_	011	┚							
Candidate Name Richard Shelby				ategory/ Type	'							
Office Sought: House Disk	oursement For:	2010		···		Contr	ihut	ion				
X Senate	X Primary	General				Jones	ibul	1011				
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Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	6635	526		
Sherman for Congress						Date o	of Di	sburse				
Mailing Address P.O. Box 75214						0 <sup>M</sup> 3	М	1	7	Y 2	2 0 Ó 8	3 <sup>Y</sup>
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Jackie Speier For Congress								<b>on ID:</b> sburse	66359 ement	02/		
Mailing Address PO Box 112						0 <sup>M</sup> 3	М	1	7 /	YZ	ó o š	3 <sup>Y</sup>
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Candidate Name Jackie Speier				ategory/ Type								
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) Pacific Life Insurance Company Political A	ction Committee		
Full Name (Last, First, Middle Initial) Ellen Tauscher for Congress			Transaction ID: 6635528 Date of Disbursement  M M / D D D / Y Y Y O Y S Y O O S
Mailing Address 20 Park Road Suite E			03 17 2008
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SUBTOTAL of Disbursements This Page (optional)	•	2000.00
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